

## Message Text

CONFIDENTIAL

PAGE 01 ISLAMA 04428 100810Z

13

ACTION MED-03

INFO OCT-01 NEA-05 ISO-00 AID-20 L-03 PER-05 SS-20 EUR-25

MMS-03 ABF-01 SP-03 /089 W  
----- 103137

P R 100615Z MAY 74

FM AMEMBASSY ISLAMABAD

TO SECSTATE WASHDC PRIORITY 4629

INFO CINCPAC

CINCUSARPAC FT SHAFTER HI

DOD WASHDC

C O N F I D E N T I A L ISLAMABAD 4428

STATE FOR DR. NYDELL

DEPT ALSO PASS AID

E.O. 11652: GDS

TAGS: AMED, PK

SUBJ: MEDICAL FACILITIES IN PAKISTAN

1. WE WERE PLEASED BY POSITIVE TONE OF STATE 075017  
RE MEDICAL FACILITIES FOR ISLAMABAD. IT GAVE THE BALL  
BACK TO US BUT HAS NECESSITATED A THOROUGH RESTUDY OF  
ALL ASPECTS OF THE PROBLEM WHICH HAS TURNED OUT TO BE  
BENEFICIAL. ALSO, IN THE INTERVAL BRITISH AND CANADIAN  
REGIONAL DOCTORS HAVE VISITED ISLAMABAD AND CONSULTATIONS  
WITH THEM HAVE BEEN USEFUL.

2. AS A RESULT OF ALL THESE STUDIES WE HAVE CHANGED  
OUR MINDS TO SOME EXTENT AS TO THE TYPE FACILITY WE NEED  
AND WHERE IT SHOULD BE LOCATED. WE NOT THINK THAT A  
NURSING HOME OF THE TYPE DESCRIBED IN ISLAMABAD 3271  
LOCATED IN A RESIDENTIAL HOUSE IN THE CITY WOULD NOT  
MEET OUR REQUIREMENTS. OUR PRIMARY CONCERN AT THIS POST  
IS ON THE ONE HAND THE HANDLING OF EMERGENCY CASES, AND  
ON THE OTHER PROPER HOSPITAL CARE DURING SERIOUS ILLNESS  
OR FOLLOWING MAJOR SURGERY. IF THE LATTER WOULD HAVE  
CONFIDENTIAL

CONFIDENTIAL

PAGE 02 ISLAMA 04428 100810Z

TO BE PERFORMED IN THE LOCAL HOSPITAL IN RAWALPINDI IN

MOST CASES IT WOULD PROBABLY BE IMPOSSIBLE TO MOVE THE PATIENT TO OUR FACILITY UNTIL AFTER THE PATIENT HAD PASSED THE POINT OF GREATEST DANGER. WE, THEREFORE, CONCLUDE THAT WHAT IS NEEDED IS A SMALL HOSPITAL SETUP, UTILIZING CAREFULLY SELECTED PAKISTANI SURGEONS AND DOCTORS AS NECESSARY TO SUPPLEMENT DR. MILTON.

3. YOUR MESSAGE MAKES REFERENCE TO PAKISTANI LAW. WE HAD CONCLUDED IN OUR FIRST GO-AROUND ON THIS SUBJECT THAT IT WOULD BE BEST NOT TO SEEK PAKISTANI APPROVAL ON THE ASSUMPTION THAT IT WASN'T ADVISABLE AS LONG AS WE MADE SOME USE OF PAKISTANI DOCTORS. WE HAVE HAD NO QUESTIONS RAISED UP TO NOW WITH RESPECT TO OUR MEDICAL UNITS. THE SMALL HOSPITAL WOULD FUNCTION WITHIN THE CONFINES OF THE DIPLOMATIC ESTABLISHMENT. AN ATTEMPT TO SEEK FORMAL APPROVAL WOULD NECESSITATE OUR RAISING QUESTIONS THE GOP WOULD MOST LIKELY PREFER NOT TO HAVE ASKED. IN STUDYING ALL ASPECTS OF THE PROBLEM, INCLUDING THIS ONE, AND TYPE OF PHYSICAL PLANT WE NOW DESIRE, WE CONCLUDED THAT IT WOULD BE BEST TO LOCATE THIS FACILITY IN OUR OWN DIPLOMATIC ENCLAVE. IT IS INTERESTING IN THIS REGARD THAT YESTERDAY THE CANADIANS CAME TO US WITH A COMBINED CANADIAN-BRITISH VIEW THAT IT WOULD BE BEST TO LOCATE THE FACILITY IN ONE OF THE DIPLOMATIC ENCLAVES, RECOMMENDING THAT IT BE AT OURS AS OUR MISSION HAD MORE PERSONNEL. WE CAN FIND THE SPACE IN THIS EXCELLENT COMPLEX THAT FBO IS BUILDING FOR US, PHYSICAL MODIFICATION OF EXISTING SPACE, AT LEAST BEYOND LOCAL GSO CAPABILITY, WOULD BE UNNECESSARY.

4. AS REGARDS EQUIPMENT, IT HAD BEEN OUR HOPE IN ATTEMPTING TO SECURE MILITARY SURPLUS THAT A PACKAGE UNIT COULD BE FOUND WHICH WOULD FIT OUR NEEDS. IT IS QUITE DIFFICULT FOR A BUSY DOCTOR HERE, WITH THE DEARTH OF MEDICAL SUPPLY CATALOGUES, ETC., TO COME UP WITH A DETAILED LIST OF REQUIREMENTS. NEVERTHELESS, HE IS WORKING ON IT, AND WE WILL GO THAT ROUTE IF NECESSARY. IT IS STILL OUR HOPE, HOWEVER, THAT THIS PROCESS CAN BE SIMPLIFIED. IN THIS CONNECTION WE ARE MUCH ENCOURAGED BY CINCPAC'S MESSAGE 040057Z MAY 74 RE SURPLUS MILITARY EQUIPMENT. THINGS MAY HAVE CHANGED A GREAT DEAL SINCE WORLD WAR II

CONFIDENTIAL

CONFIDENTIAL

PAGE 03 ISLAMA 04428 100810Z

WHEN I WAS BUILDING HOSPITALS IN THIS PART OF THE WORLD AND REQUISITIONING HOSPITAL UNITS, WHICH WAS A VERY SIMPLE PROCESS FOR THE MAN IN THE FIELD. WHAT WE THINK WE NEED IS ESSENTIALLY THE EQUIPMENT FOR A 50 BED HOSPITAL UNIT, LESS ABOUT 40 OF THE BEDS. IF THIS CANNOT BE FOUND, WE STILL WONDER WHETHER THE ITEMIZATION OF OUR REQUIREMENTS CANNOT BEST BE DONE IN WASHINGTON. WE ASSUME THAT THE MEDICAL DIVISION OF STATE HAS AN INVENTORY OF WHAT WE

NOW HAVE ON HAND. MILITARY SUPPLY OFFICES IN THE PENTAGON WOULD HAVE, WE ASSUME, INVENTORY LISTS FOR THE EQUIPMENT WITH A 50 BED UNIT. IF STAFF WORK OF THIS NATURE COULD BE DONE IN WASHINGTON IT WOULD SEEM TO BE MUCH QUICKER AND PROBABLY AVOID RE-REQUISITION OF OVER-LOOKED ITEMS.

5. AS REGARDS PERSONNEL, IT IS APPARENT THAT THE LOAD THAT WILL HAVE TO BE CARRIED BY DR. MILTON WILL GREATLY INCREASE AND THAT HE WILL NEED SUPPORT. EVEN THOUGH IT MAY TAKE SOME TIME, WE WOULD RECOMMEND THAT LONG RANGE PLANS BE MADE FOR THE ASSIGNMENT HERE OF TWO AMERICAN NURSES, WITH ONE WHO COULD PERFORM IN A SUPERVISORY MANNER. UNTIL THIS COULD BE OBTAINED, WE WOULD GO AHEAD WITH CONTRACT PERSONNEL FROM OUR OWN OFFICIAL FAMILY OR PERHAPS THIRD COUNTRY NATIONALS.

6. IT IS DIFFICULT FOR US TO COME UP WITH ANY FIRM FIGURE AS TO MONTHLY COSTS FOR RUNNING THIS ESTABLISHMENT IN VIEW OF THE UNCERTAINTIES THAT STILL EXIST. AT THIS STAGE WE CAN ONLY GIVE AN ESTIMATED MONTHLY COST OF \$1700 (IF FACILITIES ARE HOUSED IN EMBASSY COMPOUND FACILITIES), WHICH WE ASSUME WOULD BECOME A SHARED ADMINISTRATIVE COST AMONG THE VARIOUS AGENCIES THAT HAVE PERSONNEL AT THIS POST. IT SHOULD BE KEPT IN MIND, OF COURSE, THAT SOME OF OUR CURRENT EXPENSES WILL BE REDUCED. PRESENT HOSPITAL AND DOCTOR COSTS WOULD BE IN THIS CATEGORY, AS WELL AS EVACUATION COSTS FOR THOSE THAT WOULD NOT HAVE TO BE EVACUATED IF WE HAD THIS TYPE FACILITY. ALSO SOME OF OUR LOCAL COSTS WILL BE IN RUPPEES.

7. THERE ARE A NUMBER OF WAYS IN WHICH THE OTHER THREE MISSIONS COULD CONTRIBUTE FINANCIALLY AND THESE WOULD HAVE TO BE REFINED AS WE GO ALONG AND SEE WHAT TYPE OF PLANT WE

CONFIDENTIAL

CONFIDENTIAL

PAGE 04 ISLAMA 04428 100810Z

FINALLY GET. AS ONE ALTERNATIVE, THEY COULD PAY THE DOCTORS AND NURSES SALARIES. THE MOST SIMPLE APPROACH WOULD PROBABLY BE A FIXED DAILY FEE FOR OTHER NATIONALITIES USING OUR FACILITIES. WE COULD COME UP WITH A FIGURE HERE LATER ON FOR APPROVAL IN THE DEPARTMENT. WE DO NOT, OF COURSE, PLAN TO TAKE ON NORMAL DAILY OUT PATIENT TYPE OF MEDICAL ASSISTANCE FOR OTHER MISSIONS.

8. I WOULD HOPE THERE COULD BE INTER-AGENCY STAFF DISCUSSIONS IN WASHINGTON ON THIS MESSAGE PRIOR TO THE TIME THAT DR. NYDELL DEPARTS FOR GARMISCH. OUR DR. MILTON WILL BE ATTENDING THE MEDICAL CONFERENCE THERE AND THIS WOULD SEEM TO PROVIDE AN IDEAL OPPORTUNITY FOR DIRECT DISCUSSIONS ABOUT OUR PROBLEMS HERE.

BYROADE

CONFIDENTIAL

NNN

## Message Attributes

**Automatic Decaptioning:** X  
**Capture Date:** 01 JAN 1994  
**Channel Indicators:** n/a  
**Current Classification:** UNCLASSIFIED  
**Concepts:** n/a  
**Control Number:** n/a  
**Copy:** SINGLE  
**Draft Date:** 10 MAY 1974  
**Decaption Date:** 01 JAN 1960  
**Decaption Note:**  
**Disposition Action:** RELEASED  
**Disposition Approved on Date:**  
**Disposition Authority:** GarlanWA  
**Disposition Case Number:** n/a  
**Disposition Comment:** 25 YEAR REVIEW  
**Disposition Date:** 28 MAY 2004  
**Disposition Event:**  
**Disposition History:** n/a  
**Disposition Reason:**  
**Disposition Remarks:**  
**Document Number:** 1974ISLAMA04428  
**Document Source:** CORE  
**Document Unique ID:** 00  
**Drafter:** n/a  
**Enclosure:** n/a  
**Executive Order:** GS  
**Errors:** N/A  
**Film Number:** D740114-0390  
**From:** ISLAMABAD  
**Handling Restrictions:** n/a  
**Image Path:**  
**ISecure:** 1  
**Legacy Key:** link1974/newtext/t19740558/aaaabzrp.tel  
**Line Count:** 169  
**Locator:** TEXT ON-LINE, ON MICROFILM  
**Office:** ACTION MED  
**Original Classification:** CONFIDENTIAL  
**Original Handling Restrictions:** n/a  
**Original Previous Classification:** n/a  
**Original Previous Handling Restrictions:** n/a  
**Page Count:** 4  
**Previous Channel Indicators:** n/a  
**Previous Classification:** CONFIDENTIAL  
**Previous Handling Restrictions:** n/a  
**Reference:** n/a  
**Review Action:** RELEASED, APPROVED  
**Review Authority:** GarlanWA  
**Review Comment:** n/a  
**Review Content Flags:**  
**Review Date:** 22 AUG 2002  
**Review Event:**  
**Review Exemptions:** n/a  
**Review History:** RELEASED <22 AUG 2002 by WorrelSW>; APPROVED <11 FEB 2003 by GarlanWA>  
**Review Markings:**

Declassified/Released  
US Department of State  
EO Systematic Review  
30 JUN 2005

**Review Media Identifier:**  
**Review Referrals:** n/a  
**Review Release Date:** n/a  
**Review Release Event:** n/a  
**Review Transfer Date:**  
**Review Withdrawn Fields:** n/a  
**Secure:** OPEN  
**Status:** NATIVE  
**Subject:** MEDICAL FACILITIES IN PAKISTAN  
**TAGS:** AMED, PK  
**To:** STATE  
**Type:** TE  
**Markings:** Declassified/Released US Department of State EO Systematic Review 30 JUN 2005